

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 JAN 21 AM 10:07

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **L97725**

1. Corporation Name

Ameritech Pressure Cleaning Systems, Inc.

2. Principal Office Address

14743 N. Nebraska Ave.

Suite, Apt. #, etc.

City & State

Tampa, FL

Zip

33613

Country

USA

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

4. Date Incorporated or Qualified
To Do Business in Florida

1990

5. FEI Number

59-3028889

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$9.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Chuck Hanson

Street Address (P.O. Box Number is Not Acceptable)

17002 Aspen Meadows Drive

Suite, Apt. #, Etc.

City

Lutz

State

FL

Zip Code

33548

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Kelly Hanson **VP**

Date **1-17-03**

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Chuck Hanson	17002 Aspen Meadows Drive	Lutz, FL 33548
VP	Kelly Hanson	same	

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Kelly Hanson **Kelly Hanson**

Date **1-17-03**

Daytime Phone # **(813) 978-0809**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

js 1/23

AMERITECH

PRESSURE CLEANING SYSTEMS, INC.

14743 NORTH NEBRASKA AVE.

TAMPA, FL 33613

813-978-0809

Fax 813-978-1351

1-17-03

To Whom It May Concern:

Attached you will find Ameritech's application for reinstatement of our corporation, as well as a check for \$300 which covers 2002 and 2003.

After calling your department to find out why this error occurred, we realized that the yearly application from Tallahassee was sent to 28640 Sonny Drive, Wesley Chapel, FL 33544. All future applications should be sent to the above address.

I am sure that this was an oversight, as you can see our fee was paid promptly on a yearly basis prior to this. I am asking that you kindly waive the reinstatement fee of \$600.00.

~~If you need to contact me concerning this matter, please feel free to call.~~

Sincerely,


Kelly Hanson
Vice President